TRI-COUNTY MEMORIAL HOSPITAL NURSING HOME 18601 LINCOLN, P.O. BOX 65

WHITEHALL 54773 Phone: (715) 538-4361 Ownership: Non-Profit Corporation Operated from 1/1 To 12/31 Days of Operation: 365 Highest Level License: Skilled Operate in Conjunction with Hospital? Yes Operate in Conjunction with CBRF? No Number of Beds Set Up and Staffed (12/31/03): 68 Title 18 (Medicare) Certified? No Total Licensed Bed Capacity (12/31/03): 68 Title 19 (Medicaid) Certified? Yes Number of Residents on 12/31/03: 66 Average Daily Census: 62

Services Provided to Non-Residents		Age, Gender, and Primary Dia	agnosis	of Residents	(12/31/03)	Length of Stay (12/31/03)	8
Home Health Care Supp. Home Care-Personal Care	No No	Primary Diagnosis	용 		용		25.8 36.4
Supp. Home Care-Household Services	No	Developmental Disabilities	1.5	Under 65	4.5		19.7
Day Services Respite Care	No No	Mental Illness (Org./Psy) Mental Illness (Other)	25.8 15.2	•	4.5 28.8	 	81.8
Adult Day Care	No		0.0		50.0	* * * * * * * * * * * * * * * * * * *	*****
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic		95 & Over	12.1		
Congregate Meals Home Delivered Meals	No No	Cancer Fractures	0.0 1.5		100.0	,	idents
Other Meals	No	Cardiovascular		65 & Over			
Transportation	No	Cerebrovascular	15.2			RNs	6.4
Referral Service	No	Diabetes	3.0	Gender	용	LPNs	10.9
Other Services	No	Respiratory	1.5			Nursing Assistants,	
Provide Day Programming for		Other Medical Conditions	19.7	Male	24.2	Aides, & Orderlies	43.6
Mentally Ill	No			Female	75.8		
Provide Day Programming for			100.0				
Developmentally Disabled	No				100.0	I	
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Method of Reimbursement

		edicare itle 18			edicaid itle 19			Other			Private Pay			amily Care			anaged Care			
Level of Care	No.	οlo	Per Diem (\$)	No.	olo Olo	Per Diem (\$)	No.	%	Per Diem (\$)	No.	olo	Per Diem (\$)	No.	્રે જ	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	- Of
Int. Skilled Care	0	0.0	0	2	3.6	139	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.0
Skilled Care	0	0.0	0	51	92.7	120	0	0.0	0	11	100.0	141	0	0.0	0	0	0.0	0	62	93.9
Intermediate				2	3.6	101	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	3.0
Limited Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled				0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain In	j 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Depender	nt 0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		55	100.0		0	0.0		11	100.0		0	0.0		0	0.0		66	100.0

Admissions, Discharges, and		Percent Distribution	n of Residents'	Conditi	ons, Services, an	d Activities as of 12/	/31/03
Deaths During Reporting Period							
				운	Needing		Total
Percent Admissions from:		Activities of	8	Ass	sistance of	% Totally	Number of
Private Home/No Home Health	10.3	Daily Living (ADL)	Independent	One	Or Two Staff	Dependent	Residents
Private Home/With Home Health	1.1	Bathing	0.0		87.9	12.1	66
Other Nursing Homes	3.4	Dressing	37.9		47.0	15.2	66
Acute Care Hospitals	83.9	Transferring	50.0		37.9	12.1	66
Psych. HospMR/DD Facilities	1.1	Toilet Use	43.9		45.5	10.6	66
Rehabilitation Hospitals	0.0	Eating	80.3		13.6	6.1	66
Other Locations	0.0	******	*****	*****	******	******	*****
otal Number of Admissions	87	Continence		용	Special Treatmen	ts	용
ercent Discharges To:	- 1	Indwelling Or Extern	nal Catheter	1.5	Receiving Resp	iratory Care	21.2
Private Home/No Home Health	9.8	Occ/Freq. Incontine	nt of Bladder	31.8	Receiving Trac	heostomy Care	0.0
Private Home/With Home Health	4.9	Occ/Freq. Incontine	nt of Bowel	18.2	Receiving Suct	ioning	0.0
Other Nursing Homes	4.9				Receiving Osto	my Care	4.5
Acute Care Hospitals	52.4	Mobility			Receiving Tube	Feeding	1.5
Psych. HospMR/DD Facilities	1.2	Physically Restrain	ed	1.5	Receiving Mech	anically Altered Diets	37.9
Rehabilitation Hospitals	0.0						
Other Locations	1.2	Skin Care			Other Resident C	haracteristics	
Deaths	25.6	With Pressure Sores		3.0	Have Advance D	irectives	90.9
otal Number of Discharges	- 1	With Rashes		12.1	Medications		
(Including Deaths)	82				Receiving Psyc	hoactive Drugs	51.5

Selected Statistics: This Hospital-Based Facility Compared to Similar Facilities & Compared to All Facilities

	THIS	Other Hospital-	All
	Facility	Based Facilities	Facilties
	8	% Ratio	% Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	91.2	90.1 1.01	87.4 1.04
Current Residents from In-County	93.9	83.8 1.12	76.7 1.22
Admissions from In-County, Still Residing	31.0	14.2 2.19	19.6 1.58
Admissions/Average Daily Census	140.3	229.5 0.61	141.3 0.99
Discharges/Average Daily Census	132.3	229.2 0.58	142.5 0.93
Discharges To Private Residence/Average Daily Census	19.4	124.8 0.16	61.6 0.31
Residents Receiving Skilled Care	97.0	92.5 1.05	88.1 1.10
Residents Aged 65 and Older	95.5	91.8 1.04	87.8 1.09
Title 19 (Medicaid) Funded Residents	83.3	64.4 1.29	65.9 1.26
Private Pay Funded Residents	16.7	22.4 0.74	21.0 0.80
Developmentally Disabled Residents	1.5	1.2 1.28	6.5 0.23
Mentally Ill Residents	40.9	32.9 1.24	33.6 1.22
General Medical Service Residents	19.7	22.9 0.86	20.6 0.96
Impaired ADL (Mean) *	34.8	48.6 0.72	49.4 0.70
Psychological Problems	51.5	55.4 0.93	57.4 0.90
Nursing Care Required (Mean) *	10.0	7.0 1.44	7.3 1.37